

**AMENDMENT**

**COVER PAGE**

*A Public Document*

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
			( )
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE
			OPTIONAL: FAX / E-MAIL ADDRESS

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:

Division, Board, District, if applicable:

Your Position:

➔ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

- ☐ State
- ☐ County of \_\_\_\_\_
- ☐ City of \_\_\_\_\_
- ☐ Multi-County \_\_\_\_\_
- ☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

☐ Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Annual: The period covered is January 1, 2007, through December 31, 2007.

**-or-**

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2007.

☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

☐ The period covered is January 1, 2007, through the date of leaving office.

**-or-**

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate

**4. Schedule Summary**

➔ Total number of pages including this cover page: \_\_\_\_\_

➔ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached  
*Investments (Less than 10% Ownership)*

Schedule A-2 ☐ Yes – schedule attached  
*Investments (10% or greater Ownership)*

Schedule B ☐ Yes – schedule attached  
*Real Property*

Schedule C ☐ Yes – schedule attached  
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*

Schedule D ☐ Yes – schedule attached  
*Income – Gifts*

Schedule E ☐ Yes – schedule attached  
*Income – Travel Payments*

**-or-**

☐ No reportable interests on any schedule

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

**I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Date Signed \_\_\_\_\_ (month, day, year)

Signature \_\_\_\_\_ (File the originally signed statement with your filing official.)

## INSTRUCTIONS — COVER PAGE

Enter your name, mailing address, and daytime telephone number in the spaces provided. Because the Form 700 is a document available for public review, you may list your business/office address instead of your home address.

### Part 1. Office, Agency, or Court

- Enter the name of the office sought or held, or the agency or court. Consultants must enter the public agency name rather than their private firm name. (Examples: State Assembly; Board of Supervisors; Office of the Mayor; Department of Finance; Hope County Superior Court.)
- Indicate the name of your division, board, or district, if applicable. (Examples: Division of Waste Management; Board of Accountancy; District 45.)
- Enter your position title. (Examples: Director; Chief Counsel; City Council Member; Staff Services Analyst.)
- If you hold multiple positions (for example, a city council member who also is a member of a county board or commission), you may be required to file statements with each agency.

To simplify your filing obligations, you may complete an expanded statement.

To do this, enter the name of the other agency(ies) with which you are required to file and your position title(s) in the space provided. Attach an additional sheet if necessary. Complete one statement covering the disclosure requirements for all positions. Each copy must contain an original signature. Therefore, before signing a statement, make a copy for each agency. Sign each copy with an original signature and file with each agency.

Remember that if you assume or leave a position after a filing deadline, you must complete a separate statement. For example, a city council member who assumes a position with a county special district after the April 1 annual filing deadline must file a separate assuming office statement. In subsequent years, the city council member may expand his or her annual filing to include both positions.

### Part 2. Jurisdiction of Office

- Check the box indicating the jurisdiction of your agency and, if applicable, identify the jurisdiction. Judges, judicial candidates, and court commissioners have statewide jurisdiction. All other filers should review Ref. Pamphlet, page 12, to determine their jurisdiction.
- If your agency is a multi-county office, list each county in which your agency has jurisdiction.
- If your agency is not a state office, court, county office, city office, or multi-county office (for example, school districts and special districts), check the "other" box and enter the county or city in which the agency has jurisdiction.

### Example:

This filer is a member of a water district board with jurisdiction in a portion of Sutter County.

### Part 3. Type of Statement

Check at least one box.

The period covered by a statement is determined by the type of statement you are filing. If you are completing a 2007 Annual Statement, **do not** change the pre-printed dates to reflect 2008. Your annual statement is used for reporting the previous year's economic interests.

Economic interests for your annual filing covering January 1, 2007, through December 31, 2007, will be disclosed on your statement filed in 2008. (See Ref. Pamphlet, page 3, for detailed information about types of statements.)

Combining Statements: Certain types of statements may be combined. For example, if you leave office after January 1 but before the deadline for filing your annual statement, you may combine your annual and leaving office statements. File by the earliest deadline. Consult your filing officer or the FPPC.

### Part 4. Schedule Summary

- Enter the total number of completed pages including the cover page and, either:
- Check the "Yes" box for each schedule you use to disclose interests.

- or -

- If you have nothing to disclose on any schedules, check the "No reportable interests" box. Please do not attach any blank schedules.

### Part 5. Verification

Complete the verification by signing the statement and entering the date signed. When you sign your statement, you are stating, under penalty of perjury, that it is true and correct. Only the filer has authority to sign the statement. **An unsigned statement is not considered filed and you may be subject to late filing penalties.**

<b>1. Office, Agency, or Court</b>
Name of Office, Agency, or Court: South Sutter Water District
Division, Board, District, if applicable:
Position: Board member
➡ If filing for multiple positions, list additional agency(ies)/position(s): (Attach a separate sheet if necessary.)
Agency:
Position:
<b>2. Jurisdiction of Office (Check at least one box)</b>
<input type="checkbox"/> State
<input type="checkbox"/> County of _____
<input type="checkbox"/> City of _____
<input type="checkbox"/> Multi-County _____
<input checked="" type="checkbox"/> Other <u>Sutter County</u>